

Mold in the Workplace Prevention and Control



Public Employees Occupational Safety and Health Program

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July, 2004

This Information Bulletin is not a standard or regulation, and it creates no new legal obligations. The Bulletin is advisory in nature, informational in content, and is intended to provide guidance to New Jersey public employees and to assist building managers, custodians, and others who are responsible for building maintenance, and who respond to mold and moisture situations in buildings.

The New Jersey Public Employees Occupational Safety and Health (PEOSH) Program modified the U.S. Department of Labor, Occupational Safety and Health Administration (OSHA) and the U.S. Environmental Protection Agency (EPA) publications to address New Jersey's public sector needs. (See References, p.12.)

Introduction

Indoor exposure to mold can cause a variety of health effects and symptoms, including allergic reactions. Heightened public awareness has increased concern about mold growth inside buildings. This safety and health information bulletin provides recommendations for the prevention of mold growth and describes measures designed to protect the health of building occupants and workers involved in mold clean-up and prevention. This bulletin is designed primarily for building managers, custodians, and others responsible for building maintenance, but may also be used as a basic reference for those involved in mold remediation. By reading this safety and health information bulletin, individuals with little or no experience with mold remediation may be able to reasonably judge whether mold contamination can be managed in-house or whether outside assistance is required. This document will help those responsible for building maintenance in the evaluation of remediation plans. The document also provides information on mold to all New Jersey public employees.

The advice of a medical professional should always be sought if there are any emerging health issues. The information in these guidelines is intended only as a summary of basic procedures and is not intended, nor should it be used, as a detailed guide to mold remediation. These guidelines are subject to change as more

information regarding mold contamination and remediation becomes available.

Mold Basics

Molds are part of the natural environment. Molds are fungi that can be found anywhere - inside or outside-throughout the year. About 1,000 species of mold can be found in the United States, with more than 100,000 known species worldwide.

Outdoors, molds play an important role in nature by breaking down organic matter such as toppled trees, fallen leaves, and dead animals. We would not have food and medicines, like cheese and penicillin, without mold.

Indoors, mold growth should be avoided. Problems may arise when mold starts eating away at materials, affecting the look, smell, and with respect to wood-framed buildings, possibily affecting the structural integrity of the buildings.

Molds can grow on virtually any substance, as long as moisture or water, oxygen, and an organic source are present. Molds reproduce by creating tiny spores (viable seeds) that usually cannot be seen without magnification. Mold spores continually float through the indoor and outdoor air.

Molds are usually not a problem unless mold spores land on a damp spot and begin growing. They digest whatever they land on in order to survive. There are molds that grow on wood, paper, carpet, foods and insulation, while other molds feast on the everyday dust and dirt that gather in the moist regions of a building.

When excessive moisture or water accumulates indoors, mold growth often will occur, particularly if the moisture problem remains uncorrected. While it is impossible to eliminate all molds and mold spores, controlling moisture can control indoor mold growth.

Since mold requires water to grow, it is important to prevent excessive moisture in buildings. Some moisture problems in buildings have been linked to changes in building construction practices since the 1970s, which resulted in tightly sealed buildings with diminished ventilation, contributing to moisture vapor buildup. Other moisture problems may result from roof leaks, landscaping or gutters that direct water into or under a building, or unvented combustion appliances. Delayed or insufficient maintenance may contribute to moisture problems in buildings. Improper maintenance and design of building heating/ventilating/air-conditioning (HVAC) systems, such as insufficient cooling capacity for an air conditioning system, can result in elevated humidity levels in a building.

All molds share the characteristic of being able to grow without sunlight; mold needs only a viable seed (spore), a nutrient source, moisture, and the right temperature to proliferate. This explains why mold infestation is often found in damp, dark, hidden spaces; light and air circulation dry areas out, making them less hospitable for mold.

Molds gradually damage building materials and furnishings. If left unchecked, mold can eventually cause structural damage to a wood framed building, weakening floors and walls as it feeds on moist wooden structrual members. If you suspect that mold has damaged building integrity, consult a structural engineer or other professional with the appropriate expertise.

Health Effects

Scientific research on the relationship between mold exposures and health effects is ongoing. This section provides a brief overview, but does not describe all potential health effects related to mold exposure.

Currently, there are no <u>federal</u> standards or recommendations, (e.g., OSHA, NIOSH, EPA) for airborne concentrations of mold or mold spores. The NJDHSS PEOSH Program, however, enforces an Indoor Quality Standard for public employees in New Jersey that addresses visible microbial contamination in buildings (N.J.A.C. 12:100-13.4 (c)). For further information on the Standard, contact the NJDHSS PEOSH Program (see p. 12).

There are many types of mold. Most typical indoor air exposures to mold do not present a risk of adverse health effects. However, molds can cause adverse effects by producing allergens (substances that can cause allergic reactions). Allergic responses include hay fever-type symptoms such as runny nose and red eyes.

Molds may cause localized skin or mucosal infections but, in general, do not cause systemic infections in humans, except for persons with impaired immunity, AIDS, uncontrolled diabetes, or those taking immunesuppressive drugs.

Molds can also trigger asthma attacks in some individuals who are allergic to mold. In addition, exposure to mold can irritate the eyes, skin, nose and throat in certain individuals. Symptoms other than allergic and irritant types are not commonly reported as a result of inhaling mold in the indoor environment.

Some specific species of mold produce mycotoxins under certain environmental conditions. Potential health effects from mycotoxins are the subject of ongoing scientific research and are beyond the scope of this document.

Potential health concerns are important reasons to prevent mold growth and to remediate existing problem areas.

Prevention

The Key to Mold Control is Moisture Control!

When water leaks or spills occur indoors - act promptly. Any intial water infiltration should be stopped and cleaned promptly. A prompt response (within 24-48 hours) and thorough clean-up, drying, and/or removal of water-damaged materials will prevent or limit mold growth.

Mold prevention tips include:

- Repair plumbing leaks and leaks in the building structure as soon as possible.
- Look for condensation and wet spots. Fix source(s) of moisture incursion problem(s) as soon as possible.
- Prevent moisture from condensing by increasing surface temperature or reducing the moisture level in the air (humidity). To increase surface temperature, insulate or increase air circulation. To reduce the moisture level in the air, repair leaks, increase ventilation (if outside air is cold and dry), or dehumidify (if outdoor air is warm and humid).
- Keep HVAC drip pans clean, flowing properly, and unobstructed.
- Perform regularly scheduled building/HVAC inspections and maintenance, including filter changes.
- Maintain indoor relative humidity below 70%.
- Vent moisture-generating appliances, such as dryers, to the outside where possible.
- Vent kitchens (cooking areas) and bathrooms according to local code requirements.
- Clean and dry wet or damp spots as soon as possible, but no more than 48 hours after discovery.
- Provide adequate drainage around buildings and sloping the ground away from building foundations. Follow all local building codes.
- Pinpoint areas where leaks have occurred, identifying the causes, and take preventive action to ensure that they do not reoccur.

Questions That May Assist in Determining Whether a Mold Problem Currently Exists

Are building materials or furnishings visibly moisture damaged?

- Have building materials been wet more than 48 hours?
- Are there existing moisture problems in the building?
- Are building occupants reporting musty or moldy odors?
- Are building occupants reporting health symptoms that they think are related to mold in the indoor environment?
- Has the building been recently remodeled or has the building use changed?
- Has routine maintenance been delayed or the maintenance plan been altered?

Always consider consulting a health professional to address any employee health concerns.

Remediation Plan

Remediation includes both the identification and correction of the conditions that permit mold growth, as well as the steps to safely and effectively remove mold damaged materials.

Before planning the remediation, assess the extent of the mold or moisture problem and the type of damaged materials. If you choose to hire outside assistance to do the clean-up, make sure the contractor has experience with mold remediation. Check references and ask the contractor to follow the recommendations in EPA's publication, "Mold Remediation in Schools and Commercial Buildings," or other guidelines developed by professional or governmental organizations.

The remediation plan should include steps to permanently correct the water or moisture problem.

The plan should cover the use of appropriate personal protective equipment (PPE). It also should include steps to carefully contain and remove moldy building materials in a manner that will prevent further contamination. Remediation plans may vary greatly depending on the size and complexity of the job, and may require revision if circumstances change or new facts are discovered.

If you suspect that the HVAC system is contaminated with mold, or if mold is present near the intake to the system, contact the National Air Duct Cleaners Association (NADCA), or consult EPA's guide, "Should You Have the Air Ducts in Your Home Cleaned?" before

taking further action. Do not run the HVAC system if you know or suspect that it is contaminated with mold, as it could spread contamination throughout the building. If the water or mold damage was caused by sewage or other contaminated water, consult a professional who has experience cleaning and repairing buildings damaged by contaminated water.

The remediation manager's highest priority must be to protect the health and safety of the building occupants and remediators. Remediators should avoid exposing themselves and others to mold-laden dusts as they conduct their clean-up activities. Caution should be used to prevent mold and mold spores from being dispersed throughout the air where they can be inhaled by building occupants. In some cases, especially those involving large areas of contamination, the remediation plan may include temporary relocation of some or all of the building occupants.

When deciding if relocating occupants is necessary, consideration should be given to the size and type of mold growth, the type and extent of health effects reported by the occupants, the potential health risks that could be associated with the remediation activity, and the amount of disruption this activity is likely to cause. In addition, before deciding to relocate occupants, one should also evaluate the remediator's ability to contain/minimize possible aerosolization of mold spores given their expertise and the physical parameters of the workplace. When possible, remediation activities should be scheduled during off hours when building occupants are less likely to be affected.

Mold Remediation/Clean-up Methods

The purpose of mold remediation is to correct the moisture problem and to remove moldy and contaminated materials to prevent human exposure and further damage to building materials and furnishings. Porous materials that are wet and have mold growing on them may have to be discarded because molds can infiltrate porous substances and grow on or fill in empty spaces or crevices. This mold can be difficult or impossible to remove completely.

As a general rule, simply killing the mold, for example, with a biocide is not enough. The mold must be removed, since the chemicals and proteins, which can cause a reaction in humans, are present even in dead mold.

A variety of clean-up methods are available for remediating damage to building materials and furnishings caused by moisture control problems and mold growth. The specific method or group of methods used will depend on the type of material affected. Some methods that may be used include the following:

Wet Vacuum

Wet vacuums are vacuum cleaners designed to collect water. They can be used to remove water from floors, carpets, and hard surfaces where water has accumulated. They should not be used to vacuum porous materials, such as gypsum board. Wet vacuums should be used only on wet materials, as spores may be exhausted into the indoor environment if insufficent liquid is present. The tanks, hoses, and attachments of these vacuums should be thoroughly cleaned and dried after use since mold and mold spores may adhere to equipment surfaces.

Damp Wipe

Mold can generally be removed from nonporous sufaces by wiping or scrubbing with water and detergent. It is important to dry these surfaces quickly and thoroughly to discourage further mold growth. Instructions for cleaning surfaces, as listed on product labels, should always be read and followed.

HEPA Vacuum

HEPA (High-Efficiency Particulate Air) vacuums are recommended for final clean-up of remediation areas after materials have been thoroughly dried and contaminated materials removed. HEPA vacuums also are recommended for clean-up of dust that may have settled on surfaces outside the remediation area. Care must be taken to assure that the filter is properly seated in the vacuum so that all the air passes through the filter. When changing the vacuum filter, remediators should wear respirators, appropriate personal protective clothing, gloves, and eye protection to prevent exposure to any

captured mold and other contaminants. The filter and contents of the HEPA vacuum must be disposed of in impermeable bags or containers in such a way as to prevent release of the debris.

Disposal of Damaged Materials

Building materials and furnishings contaminated with mold growth that are not salvageable should be placed in sealed impermeable bags or closed containers while in the remediation area. These materials can usually be discarded as ordinary construction waste. It is important to package mold-contaminated materials in this fashion to minimize the dispersion of mold spores. Large items with heavy mold growth should be covered with polyethylene sheeting and sealed with duct tape before being removed from the remediation area. Some jobs may require the use of dust-tight chutes to move large quantities of debris to a dumpster strategically placed outside a window in the remediation area.

Use of Biocides

The use of a biocide, such as chlorine bleach, is not recommended as a routine practice during mold remediation, although there may be instances where professional judgment may indicate its use (for example, when immuno-compromised individuals are present). In most cases, it is not possible or desirable to sterilize an area, as a background level of mold spores comparable to the level in outside air will persist. However, the spores in the ambient air will not cause further problems if the moisture level in the building has been corrected. Biocides are toxic to animals and humans, as well as to mold. If you choose to use disinfectants or biocides, always ventilate the area, using outside air if possible, and exhaust the air to the outdoors. When using fans, take care not to extend the zone of contamination by distributing mold spores to a previously unaffected area.

Never mix chlorine bleach solution with other cleaning solutions or detergents that contain ammonia because this may produce highly toxic vapors and create a hazard to workers.

Some biocides are considered pesticides, and some states require that only registered pesticide applicators

apply these products in schools, commercial buildings, and homes. Make sure anyone applying a biocide is properly licensed where required. For further information, contact the New Jersey Department of Environmental Protection, Pesticide Control Program, at 609-984-6507.

Fungicides are commonly applied to outdoor plants, soil, and grains as a powder or spray. Examples of fungicides include hexachlorobenzene, organomercurials, pentachlorophenol, phthalimides, and dithiocarbamates.

Do not use fungicides developed for outdoor use in any indoor application, as they can be extremely toxic to animals and humans in an enclosed environment.

When you use biocides as a disinfectant or a pesticide, or as a fungicide, you should use appropriate PPE, including respirators. Always, read and follow product label precautions. It is a violation of Federal (EPA) law to use a biocide in any manner inconsistent with its label instructions.

Mold Remediation Guidelines

This section presents remediation guidelines for building materials that have or are likely to have mold growth. The guidelines are designed to protect the health of clean-up personnel and other workers during remediation. These guidelines are based on the size of the area impacted by mold contamination. Please note that these are guidelines; some professionals may prefer other remediation methods, and certain circumstances may require different approaches or variations on the approaches described below. If possible, remediation activities should be scheduled during off-hours when building occupants are less likely to be affected.

Although the level of personal protection suggested in these guidelines is based on the total surface area contaminated and the potential for remediator or occupant exposure, professional judgment always should play a part in remediation decisions. These remediation guidelines are based on the size of the affected area to make it easier for remediators to select appropriate techniques, not on the basis of research showing there is a specific method appropriate at a certain number of square feet. The guidelines have been designed to help construct

a remediation plan. The remediation manager should rely on professional judgment and experience to adapt the guidelines to particular situations. When in doubt, caution is advised. Consult an experienced mold remediator for more information.

Level I: Small Isolated Areas (10 sq. ft. or less) - e.g., ceiling tiles, small areas on walls.

- Remediation can be conducted by the regular building maintenance staff as long as they are trained on proper clean-up methods, personal protection, and potential health hazards. This training can be performed as part of a program to comply with the requirements of the PEOSH Hazard Communication Standard (N.J.A.C. 12:100-7).
- Respiratory protection (e.g., N-95 disposable respirator) is recommended. Respirators must be used in accordance with the PEOSH adopted Respiratory Protection Standard (29 CFR 1910.134). Gloves and eye protection should be worn.
- The work area should be unoccupied. Removing people from spaces adjacent to the work area is not necessary, but is recommended for infants (less than 12 months old), persons recovering from recent surgery, immune-suppressed people, or people with chronic inflammatory lung diseases (e.g., asthma, hypersensitivity pneumonitis, and severe allergies).
- Containment of the work area is not necessary. Dust suppression methods, such as misting (**not soaking**) surfaces prior to remediation, are recommended.
- Contaminated materials that cannot be cleaned should be removed from the building in a sealed impermeable plastic bag. These materials may be disposed of as ordinary waste.
- The work area and areas used by remediation workers for egress should be cleaned with a damp cloth or mop and a detergent solution.
- All areas should be left dry and visibly free from contamination and debris.

Level II: Mid-Sized Isolated Areas (10-30 sq. ft.) - e.g., individual wallboard panels.

 Remediation can be conducted by the regular building maintenance staff. Such persons should receive training on proper clean-up methods, personal

- protection, and potential health hazards. This training can be performed as part of a program to comply with the requirements of the PEOSH Hazard Communication Standard (N.J.A.C. 12:100-7).
- Respiratory protection (e.g., N-95 disposable respirator) is recommended. Respirators must be used in accordance with the PEOSH adopted Respiratory Protection Standard (29 CFR 1910.134). Gloves and eye protection should be worn.
- The work area should be unoccupied. Removing people from spaces adjacent to the work area is not necessary, but is recommended for infants (less than 12 months old), persons recovering from recent surgery, immune-suppressed people, or people with chronic inflammatory lung diseases (e.g., asthma, hypersensitivity pneumonitis, and severe allergies).
- Surfaces in the work area that could become contaminated should be covered with a secured plastic sheet(s) before remediation to contain dust/ debris and prevent further contamination.
- Dust suppression methods, such as misting (not soaking) surfaces prior to remediation, are recommended.
- Contaminated materials that cannot be cleaned should be removed from the building in a sealed impermeable plastic bag. These materials may be disposed of as ordinary waste.
- The work area and areas used by remediation workers for egress should be HEPA-vacuumed and cleaned with a damp cloth or mop and a detergent solution.
- All areas should be left dry and visibly free from contamination and debris.

Level III: Large Isolated Areas (30-100 sq. ft.) - e.g., several wallboard panels.

Industrial hygienists or other environmental health and safety professionals with experience performing microbial investigations and/or mold remediation should be consulted prior to remediation activities to provide oversight for the project.

The following procedures may be implemented depending upon the severity of the contamination:

■ It is recommended that personnel be trained in the handling of hazardous materials and equipped with respiratory protection (e.g., N-95 disposable

respirator). Respirators must be used in accordance with the PEOSH adopted Respiratory Protection Standard (29 CFR 1910.134). Gloves and eye protection should be worn.

- Surfaces in the work area and areas directly adjacent that could become decontaminated should be covered with a secured plastic sheet(s) before remediation to contain dust/debris and prevent further contamination.
- Seal ventilation ducts/grills in the work area and areas directly adjacent with plastic sheeting.
- The work area and areas directly adjacent should be unoccupied. Removing people from spaces near the work area is recommended for infants, persons having undergone recent surgery, immune-suppressed people, or people with chronic inflammatory lung diseases, (e.g., asthma, hypersensitivity pneumonitis, and severe allergies).
- Dust suppression methods, such as misting (not soaking) surfaces prior to mediation, are recommended.
- Contaminated materials that cannot be cleaned should be removed from the building in sealed impermeable plastic bags. These materials may be disposed of as ordinary waste.
- The work area and surrounding areas should be HEPA-vacuumed and cleaned with a damp cloth or mop and a detergent solution.
- All areas should be left dry and visibly free from contamination and debris.

Note: If abatement procedures are expected to generate a lot of dust (e.g., abrasive cleaning of contaminated surfaces, demolition of plaster walls) or the visible concentration of the mold is heavy (blanket coverage as opposed to patchy), it is recommended that the remediation procedures for Level IV be followed.

Level IV: Extensive Contamination (greater than 100 contiguous sq. ft. in an area).

Industrial hygienists or other environmental health and safety professionals with experience performing microbial investigations and/or mold remediation should be consulted prior to remediation activities to provide oversight for the project.

The following procedures may be implemented depending upon the severity of the contamination:

- Personnel trained in the handling of hazardous materials and equipped with
 - full-face piece respirators with HEPA cartridges;
 - disposable protective clothing covering the entire body including both head and shoes; and
 - gloves.
- Containment of the affected area
 - complete isolation of the work area from occupied spaces using plastic sheeting sealed with duct tape (including ventilation ducts/grills, fixtures, and other openings);
 - the use of an exhaust fan with a HEPA filter to generate negative pressurization; and
 - airlocks and a decontamination room.
- If containment practices effectively prevent mold from migrating from affected areas, it may not be necessary to remove people from the surrounding work areas. However, removal is still recommended for infants, persons having undergone recent surgery, immune-suppressed people, or people with chronic inflammatory lung diseases, (e.g., asthma, hypersensitivity pneumonitis, and severe allergies).
- Contaminated materials that cannot be cleaned should be removed from the building in sealed impermeable plastic bags. The outside of the bags should be cleaned with a damp cloth and a detergent solution or HEPA-vacuumed in the decontamination chamber prior to their transport to uncontaminated areas of the building. These materials may be disposed of as ordinary waste.
- The contained area and decontamination room should be HEPA-vacuumed and cleaned with a damp cloth or mopped with a detergent solution and be visibly clean prior to the removal of isolation barriers.

Personal Protective Equipment (PPE)

Any remediation work that disturbs mold and causes mold spores to become airborne increases the degree of respiratory exposure. Actions that tend to disperse mold include: breaking apart moldy porous materials such as wallboard; destructive invasive procedures to examine or remediate mold growth in a wall cavity; removal of contaminated wallpaper by stripping or peeling; using fans to dry items or ventilate areas.

The primary function of personal protective equipment is to prevent the inhalation and ingestion of mold and mold spores and to avoid mold contact with the skin or eyes. The following sections discuss the various types of PPE that may be used during remediation activities.

Skin and Eye Protection

Gloves protect the skin from contact with mold, as well as from potentially irritating cleaning solutions. Long gloves that extend to the middle of the forearm are recommended. The glove material should be selected based on the type of substance/chemical being handled. If you are using a biocide such as chlorine bleach, or a strong cleaning solution, you should select gloves made from natural rubber, neoprene, nitrile, polyurethane, or PVC. If you are using a mild detergent or plain water, ordinary household rubber gloves may be used.

To protect your eyes, use properly fitted goggles or a full face piece respirator. Goggles must be designed to prevent the entry of dust and small particles. Safety glasses or goggles with open vent-holes are not appropriate in mold remediation.

Respiratory Protection

Respirators protect clean-up workers from inhaling airborne mold, contaminated dust, and other particulates that are released during the remediation process. Either a half mask or full-face piece air-purifying respirator can be used. A full-face piece respirator provides both respiratory and eye protection. Please refer to the discussion of the different levels of remediation to ascertain the type of respiratory protection recommended. Respirators used to provide protection from mold and mold spores must be certified by the National Institute for Occupational Safety and Health (NIOSH). More protective respirators may have to be selected and used if toxic contaminants such as asbestos or lead are encountered during remediation.

As specified by PEOSH in 29 CFR 1910.134, individuals who use respirators must be properly trained, have medical clearance, and be properly fit-tested before they begin using a respirator. In addition, use of respirators requires the employer to develop and implement a written respiratory protection program, with worksite-specific procedures and elements.

Protective Clothing

While conducting building inspections and remediation work, individuals may encounter hazardous biological agents as well as chemical and physical hazards. Consequently, appropriate personal protective clothing (i.e., reusable or disposable) is recommended to minimize cross-contamination between work areas and clean areas, to prevent the transfer and spread of mold and other contaminants to street clothing, and to eliminate skin contact with mold and potential chemical exposures.

Disposable PPE should be discarded after it is used. They should be placed into impermeable bags, and usually can be discarded as ordinary construction waste.

Sampling for Mold

Is it necessary to sample for mold? In most cases, if visible mold growth is present, sampling is unnecessary. Air sampling for mold may not be part of a routine assessment because decisions about appropriate remediation strategies often can be made on the basis of visual inspection.

Your first step should be to inspect for any evidence of water damage and visible mold growth. Testing for mold is expensive, and there should be a clear reason for doing so. In many cases, it is not economically practical or useful to test for mold growth on surfaces or for airborne spores in the building. In addition, there are no standards for "acceptable" levels of mold in buildings, and the lack of a definitive correlation between exposure levels and health effects makes interpreting the data difficult, if not impossible.

Testing is usually done to compare the levels and types of mold spores found inside the building with those found outside of the building or for comparison with another location in the building. In addition, air sampling may provide tangible evidence supporting a hypothesis that investigators have formulated. For example, air sampling may show a higher concentration of the same species of mold when the HVAC is operating than when it has been turned off. This finding may convince the investigators that the mold is growing within, and being disseminated by the HVAC system. Conversely, negative results may persuade investigators to abandon this hypothesis and to consider other sources of mold growth or dissemination.

If you know you have a mold problem, it is more important to spend time and resources removing the mold and solving the moisture problem that causes the moldy conditions than to undertake extensive testing for the type and quantity of mold.

If you are in doubt about sampling, consult an industrial hygienist or other environmental health or safety professional with experience in microbial investigations to help you decide if sampling for mold is necessary or useful, and to identify persons who can conduct any necessary sampling. Due to the wide difference in individual susceptibility to mold contamination, sampling results may have limited application. However, sampling results can be used as a guide to determine the extent of an infestation and the effectiveness of the clean-up. Their interpretation is best left to the industrial hygienist or other environmental health or safety professional.

Sampling for mold should be conducted by professionals with specific experience in designing mold-sampling protocols, sampling methods for microbial contaminants, and interpretation of results. For additional information on air sampling, refer to the American Conference of Governmental Industrial Hygienists' document, "Bioaerosols: Assessment and Control." In addition, sampling and analysis should follow any other methods recommended by either OSHA, NIOSH, EPA, the American Industrial Hygiene Association, or other recognized professional guidelines. Types of samples can include: air samples, surface samples, bulk samples, and water samples from condensate drain pans or cooling towers.

Microscopic identification of the spores/colonies requires considerable expertise. These services are not routinely available from commercial laboratories. Documented quality control in the laboratories used for analysis of the bulk, surface, and other samples is necessary. The American Industrial Hygiene Association offers accreditation to microbial laboratories (Environmental Microbiology Laboratory Accreditation Program (EMLAP)). Accredited laboratories must participate in quarterly proficiency testing (Environmental Microbiology Proficiency Analytical Testing Program (EMPAT)).

Remediation Equipment

There are various types of equipment useful in mold assessment and remediation. Some of the more common items include:

Moisture Meters

Moisture meters measure/monitor moisture levels in building materials, and may be helpful for measuring the moisture content in a variety of building materials following water damage. They also can be used to monitor the progress of drying damaged materials. These direct-reading devices have a thin probe that is inserted into the material to be tested or pressed directly against the surface of the material. Moisture meters can be used on materials such as carpet, wallboard, wood, brick, and concrete.

Humidity Gauges or Meters

Humidity meters can be used to monitor indoor humidity. Inexpensive (less than \$50) models that monitor both temperature and humidity are available.

Humidistat

A humidistat is a control device that can be connected to an HVAC system and adjusted so that if the humidity level rises above a set point, the HVAC system will automatically turn on and reduce the humidity below the established point.

Boroscope

A boroscope is a hand-held tool that allows users to see potential mold problems inside walls, ceiling plenums, crawl spaces, and other tight areas. It consists of a video camera on the end of a flexible "snake." No major drilling or cutting of dry wall is required.

HVAC System Filter

High-quality filters must be used in a HVAC system during remediation because conventional HVAC filters are typically not effective in filtering particles the size of mold spores. Consult an engineer for the appropriate filter efficiency for your specific HVAC system, and consider upgrading your filters if necessary. A filter with a minimum efficiency of 50 to 60% or a rating of MERV 8, as determined by Test Standard 52.2 of the American Society of Heating, Refrigerating and Air-Conditioning Engineers, may be appropriate.

Remember to change filters as appropriate, especially following any remediation activities. Remove filters in a manner that minimizes the reentry of mold and other toxic substances into the workplace. Under certain circumstances, it may be necessary to wear appropriate PPE while performing this task.

How Do You Know When You Have Finished Remediation/Clean-up?

- You must have identified and completely corrected the source of the water or moisture problem.
- Mold removal should be complete. Visible mold, mold-damaged materials, and moldy odors should no longer be present.
- Sampling, if conducted, should show that the level and types of mold and mold spores inside the building are similar to those found outside.
- You should revisit the site(s) after remediation, and it should show no signs of moldy or musty odors, water damage, or mold growth and employee complaints should be diminishing.

Conclusion

The primary response to mold contamination in buildings is to correct water or moisture infiltration; then promptly remove contaminated materials and perform structural repairs.

In all situations, the underlying cause of water accumulation must be rectified or the mold growth may reoccur.

Emphasis should be placed on preventing contamination through proper building and HVAC system maintenance and prompt repair of water damaged areas.

Effective communication with building occupants is an essential component of all large-scale remediation efforts. The building owner, management, and/or employer should notify occupants in the affected area(s) of the presence of mold. Notification should include a description of the remedial measures to be taken and a timetable for completion. Group meetings held before and after remediation with full disclosure of plans and results can be an effective communication mechanism. Individuals with persistent health problems that appear to be related to mold exposure should see their physicians for a referral to practitioners who are trained in occupational/environmental medicine or related specialists and are knowledgeable about these types of exposures.

A checklist on mold remediation can be found in Appendix A on page 11.

APPENDIX A CHECKLIST FOR MOLD REMEDIATION*

Investigate and evaluate moisture and mold problems ☐ Assess size of moldy area (square feet) ☐ Consider the possibility of hidden mold ☐ Clean-up small mold problems and fix moisture problems before they become large problems ☐ Select remediation manager for medium or large-size mold problem ☐ Investigate areas associated with occupant complaints ☐ Identify source(s) or cause of water or moisture problem(s) ☐ Note type of water-damaged materials (wallboard, carpet, etc.) ☐ Check inside air ducts and air handling unit ☐ Throughout process, consult qualified professional if necessary or desired Communicate with building occupants at all stages of process, as appropriate ☐ Designate contact person for questions and comments about medium or large-scale remediation as needed Plan remediation Adapt or modify remediation guidelines to fit your situation; use professional judgment ☐ Plan to dry wet, non-moldy materials within 48 hours to prevent mold growth ☐ Select clean-up methods for moldy items ☐ Select Personal Protective Equipment - protect remediators ☐ Select containment equipment - protect building occupants Select remediation personnel who have the experience and training needed to implement the remediation plan and use Personal Protective Equipment and containment as appropriate Remediate moisture and mold problems ☐ Fix moisture problem, implement repair plan and/or maintenance plan ☐ Dry wet, non-moldy materials within 48 hours to prevent mold growth ☐ Clean and dry moldy materials ☐ Discard moldy porous items that can't be cleaned

^{*} For details, see EPA's *Mold Remediation in Schools and Commerical Buildings*. Please note that this checklist was designed to highlight key parts of a school or commerical building remediation and does not list all potential steps or problems.

References

New Jersey Department of Health and Senior Services Public Employees Occupational Safety and Health Program PO Box 360, 7th Floor Trenton, NJ 08625-0360 e-mail: peosh@doh.state.nj.us http://www.nj.gov/health/eoh/peoshweb

New Jersey Department of Labor and Workforce Development
Division of Public Safety and Occupational
Safety and Health
PO Box 386
Trenton, NJ 08625-0386
(609) 292-7036
Fax: (609) 292-3749
http://www.nj.gov/labor/lsse/lspeosh.html

New Jersey Department of Health and Senior Services Consumer and Environmental Health Services Indoor Environments Program PO Box 369 Trenton, NJ 08625 Fax: (609) 588-7618 http://www.nj.gov/health/eoh/tsrp/index.htm

U.S. Department of Labor, Occupational Safety and Health Administration. *A Brief Guide to Mold in the Workplace*. http://www.osha.gov/dts/shib/shib101003.html

U.S. Environmental Protection Agency, Office of Air and Radiation, Indoor Environments Division 2001. *Mold Remediation in Schools and Commercial Buildings*. EPA 402-K-01-001, http://www.epa.gov/iaq/molds/graphics/moldremediation.pdf

American Conference of Governmental Industrial Hygienists 1999. *Bioaerosols Assessment and Control http://www.acgih.org*National Apartment Association, http://www.naahq.org

National Institute for Occupational Safety and Health (NIOSH), http://www.cdc.gov/niosh

National Multi-Housing Council, http://www.nmhc.org

The Building Owners and Managers Association International (BOMA), http://www.boma.org

New York City Department of Health & Mental Hygiene Bureau of Environmental & Occupational Disease Epidemiology 2002. *Guidelines on Assessment and Remediation of Fungi in Indoor Environments.*http://www.nyc.gov/html/doh/html/epi/moldrpt1.html

Mold Resources List

Contact the PEOSH Consultation Project at 609-984-1863 for free consultation service. The Consultation Program can help the employer evaluate and prevent hazardous conditions in the workplace that can cause injuries and illnesses, including mold problems.

The following list of resources includes information developed and maintained by public and private organizations. However, PEOSH does not control this information and cannot guarantee the accuracy, relevance, timeliness, or completeness of this outside information. Further, the inclusion of these resources is not intended to endorse any view expressed, or products or services offered, by the author of the reference or the organization operating the service identified by the reference.

Questions and Answers on Stachybotrys Chartorum and Other Molds

http://www.cdc.gov/nceh/airpollution/mold/stachy.htm

An Office Building Occupant's Guide to IAQ http://www.epa.gov/iaq/pubs/occupgd.html

Biological Contaminants

http://www.epa.gov/iaq/biologic.html

Building Air Quality Action Plan (For Commercial Buildings) http://www.epa.gov/iaq/largebldgs/actionpl.html

Floods/Flooding

http://www.epa.gov/iaq/pubs/flood.html

Indoor Air Quality (IAQ) Home Page http://www.epa.gov/iaq

IAQ in Large Buildings/Commercial Buildings http://www.epa.gov/iaq/largebldgs/

IAQ in Schools

http://www.epa.gov/iaq/schoolsl

Mold Resources

http://www.epa.gov/iaq/molds/moldresources.html

Mold Remediation in Schools and Commercial Buildings http://www.epa.gov/iaq/molds/mold_remediation.html

U.S. EPA IAQ Information Clearinghouse (IAQINFO)

Phone: (800) 438-4318 or (703) 356-4020

Fax: (703) 356-5386 E-mail: iaqinfo@aol.com

Indoor air related documents, answers to Indoor Air Quality (IAQ) questions, maintains listing of State IAQ contracts, and regional EPA Contacts.

Air Conditioning Contractors of America (ACCA)

Phone: (703) 575-4477

http://www.acca.org/index.html

Information on indoor comfort products and services.

American College of Occupational and Environmental

Medicine (ACOEM) Phone: (847) 818-1800

http://www.acoemprivatepractice.com/

Referrals to physicians who have experience with

environmental exposures.

American Conference of Governmental Industrial

Hygienists, Inc. (ACGIH) Phone: (513) 742-2020 http://www.acgih.org

Occupational and environmental health and safety

information.

American Industrial Hygiene Association (AIHA)

Phone: (703) 849-8888 http://www.aiha.org

Information on industrial hygiene and indoor air quality

issues including mold hazards and legal issues.

American Society of Heating, Refrigerating and Air

Conditioning Engineers, Inc. (ASHRAE)

Phone: (800) 527-4723 http://www.ashrae.org

Information on engineering issues and indoor air quality.

Association of Occupational and Environmental Clinics (AOEC)

Phone: (202) 347-4976

http://www.aoec.org

Referrals to clinics with physicians, who have experience with environmental exposures, include exposure to mold; maintains a database of occupational and environmental cases.

Association of Specialists in Cleaning and Restoration (ASCR)

Phone: (800) 272-7012 or (410) 729-3603

http://www.ascr.org/institutes

Carpet and Upholstery Cleaning Institute, Mechanical System Hygiene Institute, National Institute of Disaster Restoration, National Institute Rug Cleaning, Water Loss Institute referrals to professionals.

American Academy of Allergy, Asthma & Immunology (AAAAI)

Phone: (800) 822-2762 http://www.aaaai.org/

Physician referral directory, information on allergies and

asthma.

Asthma and Allergy Foundation of America (AAFA)

Phone: (800) 7ASTHMA (800) 727-8462)

http://www.aafa.org

Information on allergies and asthma.

American Lung Association (ALA)

Phone: (800) LUNGUSA (800) 586-4872)

http://www.lungusa.org

Information on allergies and asthma.

Allergy and Asthma Network Mothers of Asthmatics (AANMA)

Phone: (800) 878-4403 or (703) 641-9595)

http://www.aanma.org

Information on allergies and asthma.

National Institute of Allergy and Infectious Diseases

(NIAID)

Phone: (301) 496-5717 http://www.niaid.nih.gov

Information on allergies and asthma.

National Jewish Medical and Research Center Phone: (800) 222-LUNG (800) 222-5864)

http://www.njc.org

Information on allergies and asthma.

Carpet and Rug Institute (CRI)

Phone: (800) 882-8846 http://www.carpet-rug.com

Carpet maintenance, restoration guidelines for water-

damaged carpet, other carpet-related issues.

Centers for Disease Control and Prevention (CDC)

Phone: (800) 311-3435 http://www.cdc.gov

Information on health-related topics including asthma, molds in the environment, and occupational health. CDC is recognized as the lead federal agency for protecting the health and safety of the American people at home and abroad. It serves as the national focus for developing and applying disease prevention and control, environmental health, and health promotion and education activities.

Floods/Flooding

Federal Emergency Management Agency (FEMA)

Phone: (800) 480-2520 http://www.fema.gov/mit

Publications on floods, flood-proofing, etc.

University of Minnesota, Department of Environmental

Health and Safety

Phone: (612) 626-5804

http://www.dehs.umn.edu/iaq/flood.html Management water infiltration into buildings.

Indoor Environmental Remediation Board (IERB)

Phone: (215) 387-4097 http://www.ierb.org

Information on best practices in building remediation.

Institute of Inspection, Cleaning and Restoration

Certification (IICRC)
Phone: (360) 693-5675
http://www.iicrc.org

Information on and standards for the inspection, cleaning,

and restoration industry.

International Sanitary Supply Association (ISSA)

Phone: (800) 225-4772 http://www.issa.com

Education and training on cleaning and maintenance.

MidAtlantic Environmental Hygiene Resource Center

(MEHRC)

Phone: (215) 387-4096 http://www.mehrc.org

Indoor environmental quality training center giving courses in building moisture and biocontamination, and managing and operating facilities for good IAQ. Extensive courses

given in IAQ.

National Air Duct Cleaners Association (NADCA)

Phone: (202) 737-2926

http://www.nadca.com

Duct cleaning information.

National Institute of Building Sciences (NIBS)

Phone: (202) 289-7800 http://www.nibs.org

Information on building regulations, science, and

technology.

National Institute for Occupational Safety and Health

(NIOSH)

Phone: (800) 35NIOSH (800) 356-4674)

http://www.cdc.gov/niosh

Health and safety information with a workplace

orientation.

National Pesticide Information Center (NPIC)

Phone: (800) 858-7378 http://npic.orst.edu/

Information on pesticides/antimicrobial chemicals,

including safety and disposal information.

New York Department of Health, Bureau of Environmental and Occupational Disease Epidemiology, Guidelines on Assessment and Remediation of Fungi in

Indoor Environments.

Phone: (212) 788-4290 http://www.ci.nyc.ny.us/html/doh/html/epi/

moldrpt1.html

Occupational Safety and Health Administration (OSHA)

Phone: (800) 321-OSHA (800) 321-6742)

http://www.osha.gov

Information on worker safety and health, compliance assistance, laws and regulations, cooperative programs,

state programs, statistics, and newsroom.

Sheet Metal and Air Conditioning Contractors' National

Association (SMACNA) Phone: (703) 803-2980 http://www.smacna.org

Technical information on topics such as air conditioning

and air ducts.

Document prepared by: Carol Lamond, R.N., M.S. NJDHSS PEOSH Program Education and Training Project

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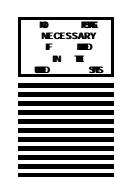
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